

# Work Order ID 85446

June-08-12 10:07:17 AM

DEL 750

\*85446\*

Page 1

Item ID: D2618

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Bushing

Start Date: 08/06/2012 Start Qty: 60.00

\*60\*

Cust Item ID:

Required Date: 22/06/2012 Req'd Qty: 60.00

\*60\*

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 12/06/08 Tooling:

Date:

Run Start \*NR1\*

QC:

Date: SPC (Y/N):

Date:

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

D2618

Rev B1

100

0.00

\*100\*

Hardinge CNC LATHE SMALL

24 12-8-26

68 4

Hardinge

Memo

0.00

Hardinge CNC Lathe Small

1-Turn as per Folio FA195 & Dwg D2618.2-Deburr

110

QC2- Inspect parts off machine FAI/FAIB

0.00

\*110\*

24 12-8-26

68 4

QC

Memo

0.00

Quality Control

120

QC8- Inspect parts - second check

0.00

\*120\*

15.2 12/08/26

68 4

QC

Memo

0.00

Quality Control

# Work Order ID 85446

**\*85446\***

Page 2

June-08-12 10:07:17 AM

Item ID: D2618

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Bushing

Start Date: 08/06/2012 Start Qty: 60.00

**\*60\***

Cust Item ID:

Required Date: 22/06/2012 Req'd Qty: 60.00

**\*60\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location: <u>13</u>	0.00							
<b>*130*</b>						68		12/8/27	
Packaging	Memo	0.00							
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
<b>*140*</b>									
QC	Memo	0.00							
Quality Control									

CK 12/8/27.  
MF  
12-08-27

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/>            Other <input type="checkbox"/> </div> <div>           Engineering Quality <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Offset/Setup											
Other											
Process											
Supplier											
Training											
Unauthorized											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending Passes Below Min <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimp at Bending <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Other <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Ripples on Inner Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>Hardware</b> <input type="checkbox"/> Breaking <input type="checkbox"/> Missing <input type="checkbox"/> Size/Length <input type="checkbox"/> Spinning <input type="checkbox"/> Threading <input type="checkbox"/> Wrong  <b>Drill Holes</b> <input type="checkbox"/> Misaligned <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Undersized <input type="checkbox"/> Too Many	<b>General</b> <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Documentation/Data <input type="checkbox"/> Finish <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Inspection Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Jigs/Fixtures/Tooling <input type="checkbox"/> Kit Incorrect <input type="checkbox"/> Kit Missing	<input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Off-Set <input type="checkbox"/> Orientation Misread <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Lost <input type="checkbox"/> Part Moved <input type="checkbox"/> Raw Material	<input type="checkbox"/> Set-up <input type="checkbox"/> Supplier <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other _____ _____ _____

# Picklist Print

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Page 1

Work Order ID: 85446

**\*85446\***

Parent Item: D2618

**\*D2618\***

Parent Item Name: Bushing

Start Date: 08/06/2012

Required Date: 22/06/2012

Start Qty: 60.00

Required Qty: 60.00

Comments: IPP Rev:F Re-format 05-11-22 JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MDEL RINR0.750		Purchased	No			100	f	150.6450	0.258	16.29474			
<b>*MDFI RINR0 750*</b>									<b>**</b>				
Delrin Round Bar 0.75"													

24 12.8.26

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
MAT055	150.645	
116183	2.4	
117273	1.555	
117322	0.94	
120722	5.28	
121783	140.47	

122582

~~10 2.223~~ 13'  
~~3.773~~ 3'

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Prod. Eng. Coord. <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Supplier <input type="checkbox"/>		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Other <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Supplier <input type="checkbox"/>																
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Other <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Offset/Setup									
Other									
Process									
Supplier									
Training									
Unauthorized									

### FAULT CATEGORY

Landing Gear	Hardware	General	Maintenance
<input type="checkbox"/> Bending Passes Below Min	<input type="checkbox"/> Breaking	<input type="checkbox"/> Burrs	<input type="checkbox"/> Set-up
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> Missing	<input type="checkbox"/> Contamination	<input type="checkbox"/> Supplier
<input type="checkbox"/> Cracks	<input type="checkbox"/> Size/Length	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Temperature/Cure
<input type="checkbox"/> Crushed/Crimp at Bending	<input type="checkbox"/> Spinning	<input type="checkbox"/> Documentation/Data	<input type="checkbox"/> Weld
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Threading	<input type="checkbox"/> Finish	<input type="checkbox"/> Wrong Stock Pulled
<input type="checkbox"/> Other	<input type="checkbox"/> Wrong	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Positioned Wrong		<input type="checkbox"/> Inspection Unqualified	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Ripples on Inner Bend	<b>Drill Holes</b>	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Misaligned	<input type="checkbox"/> Jigs/Fixtures/Tooling	<input type="checkbox"/> Over/Under tolerance
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Kit Incorrect	<input type="checkbox"/> Part Lost
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Over/Undersized	<input type="checkbox"/> Kit Missing	<input type="checkbox"/> Part Moved
	<input type="checkbox"/> Too Many		<input type="checkbox"/> Raw Material
			<input type="checkbox"/> Other





RELEASED  
R 07/05/13 DS

DESIGN BW	DRAWN BY KE	DART AEROSPACE LTD VICTORIA INTERNATIONAL AIRPORT, CANADA	
CHECKED BW	APPROVED BW	DRAWING NO. D2618	REV. B SHEET 1 OF 1
DATE 96:10:30	TITLE BUSHING		SCALE 1:1
B	97.05.09	3.125 WAS 1.625, .313 WAS .375	
81 4-8 04.06.03 CHANGE DIM FOR BETTER FIT			

3.125  $\pm 0.010$   $\triangle$

3.125  $\pm 0.010$



$\varnothing 0.500 \pm 0.010$

$\varnothing 0.313 \pm 0.020$

SHOP COPY  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER  
NO. 85446 M-LJ

12/06/08

MATERIAL: DELRIN OR TEFLON OR NYLON

